

APR - 1 2013

FILED

Please type or print in ink.

NAME OF FILER

Morales, Jorge

(LAST)

By

(FIRST)

(MIDDLE)

1. Office, Agency, or Court

Agency Name

City of South Gate

Division, Board, Department, District, if applicable

City Council

Your Position

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: please see attachment

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of South Gate

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.

-or-

The period covered is / / , through December 31, 2012.

☐ Leaving Office: Date Left / /
(Check one)

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ Assuming Office: Date assumed / /

☐ The period covered is / / , through the date of leaving office.

☐ Candidate: Election year and office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge

I certify under penalty of perjury under the laws of the State of

Date Signed 04/01/2013

(month, day, year)

Additional Agencies/Positions for Jorge Morales

Office, Agency or Court: City of South Gate Division, Board, District, if applicable: Public Utility Authority Position: Authority Member	Office, Agency or Court: County Sanitation District No(s) 1, 2 of the Los Angeles County Division, Board, District, if applicable: Board of Directors Position: Alternate Director
Office, Agency or Court: City of South Gate Division, Board, District, if applicable: Public Finance Authority Position: Authority Member	
Office, Agency or Court: City of South Gate Division, Board, District, if applicable: Public Access Corporation Position: Director	
Office, Agency or Court: City of South Gate Division, Board, District, if applicable: Public Housing Authority Position: Authority Member	
Office, Agency or Court: City of South Gate Serving as the Successor Agency Division, Board, District, if applicable: City Council Position: Chairperson/Agency Member	
Office, Agency or Court: California Contract Cities Association Division, Board, District, if applicable: Board of Directors Position: Board Member	
Office, Agency or Court: League of California Cities Association Division, Board, District, if applicable: Board of Directors Position: Alternate Board Member	
Office, Agency or Court: Hub Cities Consortium Division, Board, District, if applicable: Board of Directors Position: Alternate Board Member	

SCHEDULE D
Income – Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Jorge Morales

► NAME OF SOURCE (Not an Acronym)

Primestor

ADDRESS (Business Address Acceptable)

201 S. Figueroa Street, Los Angeles CA 90012

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 06 / 12	\$ 130	2 tix to HOPE Dinner
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

Southern California Edison

ADDRESS (Business Address Acceptable)

2244 Walnut Grove Avenue, Rosemead, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08 / 15 / 12	\$ 408	Leadership Institute
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

Comments: _____